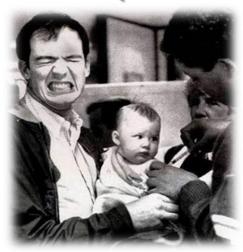
Navigating through School Immunizations (for the Provider)



AIPO Immunization Conference

Alexandra Bhatti, MPH, JD*
Immunization Assessment Manager
Arizona Immunization Program Office









Why are Vaccinations Important?

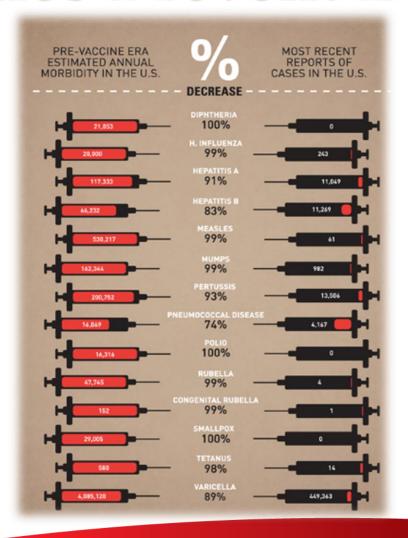








Vaccines Prevent Disease







So What is Your Role?





Immunization Provider Role

- ✓ Provide Strong Recommendations
- ✓ Remind/Recall Parents/Guardian when child is due for a vaccine(s)
- ✓ Administer Vaccine
- ✓ Education
- ✓ Are required for school attendance
 - you help enforce state mandated rules and statutes
- ✓ Stop the spread of disease





- ✓ Recalling the children in time:
 - ✓ Law requires students be up-to-date upon school entry
- ✓ Vaccine hesitant parents
- ✓ Immunization recordkeeping and reporting





Let's Switch Gears For a Moment...





State-wide

- Coverage rates for state mandated immunizations remain high, although there has been a decrease over time.
- Exemption rates have been increasing over the last decade.
- There is a difference in exemption rates between the various school types: charter, public, private
- As exemption rates increase, vaccination coverage rates decrease





• The table below details the 2014-2015 child-care coverage rates compared to those since 2010-2011.

	Child Care Number of Students	DTaP 4+	Polio 3+	MMR 1+	Hib 3+	*Hep A 2	Hep B 3+	VAR 1+ or Hx	Religious Exemption
2010-2011	76,659	94.7%	96.5%	96.4%	94.4%	81.8%	95.7%	96.2%	3.4%
2011-2012	76,615	94.8%	96.2%	96.3%	94.5%	83.0%	95.4%	96.0%	3.4%
2012-2013	84,244	93.6%	95.3%	95.6%	94.4%	80.9%	94.2%	95.3%	3.8%
2013-2014	81,606	93.4%	95.4%	95.7%	94.6%	80.8%	94.1%	95.1%	4.1%
2014-2015	84,779	93.2%	95.4%	95.8%	94.6%	81.3%	94.0%	95.3%	3.6%





- The table below details the 2014-2015 school year coverage rates compared to those since the 2010-2011 school year
- First year since 2007-2008 that PBE rates have not gone up!

	Kindergarten Number of Students	DTaP 4+	Polio 3+	MMR 2+	НерВ 3+	VAR 1	Personal Belief Exemptions
2010-2011	83,348	95.6%	95.6%	95.3%	96.6%	97.3%	3.2%
2011-2012	85,316	94.9%	95.0%	94.7%	96.3%	96.9%	3.4%
2012-2013	87,909	94.6%	94.7%	94.5%	95.9%	96.8%	3.9%
2013-2014	85,861	94.3%	94.7%	93.9%	95.9%	96.4%	4.7%
2014-2015	84,651	94.3%	94.7%	94.2%	95.7%	96.4%	4.6%





- The table below details the 2014-2015 school year coverage rates compared to those since the 2010-2011 school year
- First year since 2005-2006 that PBE rates have not gone up!

	6th Grade Number of Students	Tdap 1	MCV 1	MMR 2	Нер В 3	VAR 1	Personal Belief Exemptions
2010-2011	82,047	87.80%	88.20%	97.70%	97.80%	98.00%	3.7%
2011-2012	82,581	88.70%	89.20%	97.30%	97.60%	97.60%	4.0%
2012-2013	82,765	90.10%	90.20%	97.50%	97.60%	97.60%	3.9%
2013-2014	81,588	89.9%	89.80%	97.50%	97.60%	97.60%	4.7%
2014-2015	86,000	90.0%	89.8%	97.4%	97.5%	97.9%	4.7%



Why is all of this important?





Diseases are Real









Images retrieved from http://phil.cdc.gov/phil/home.asp, iac.org, /



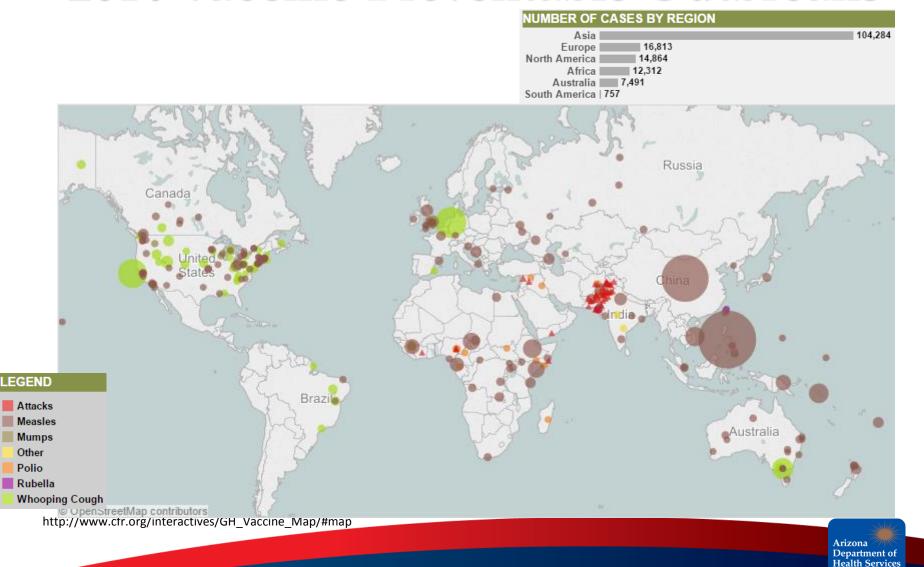
We are a Global Community



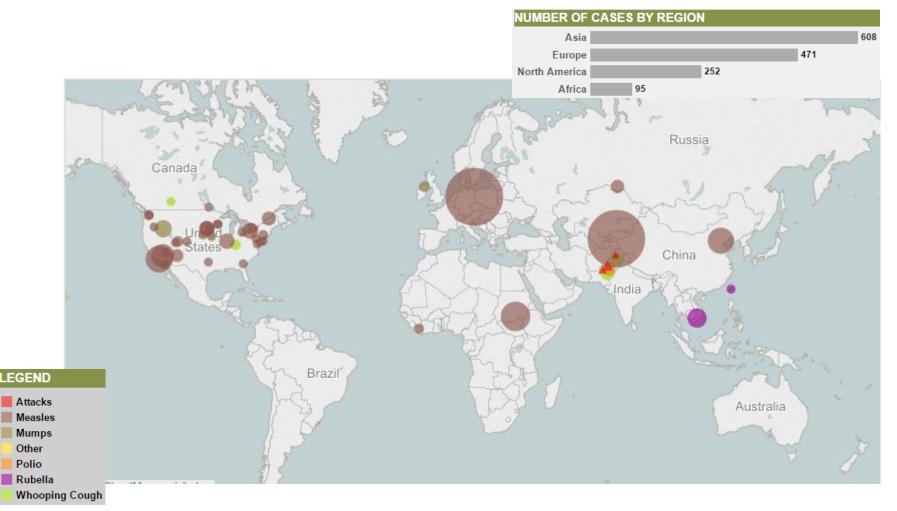
Diseases are just a plane ride away



2014 Vaccine Preventable Outbreaks



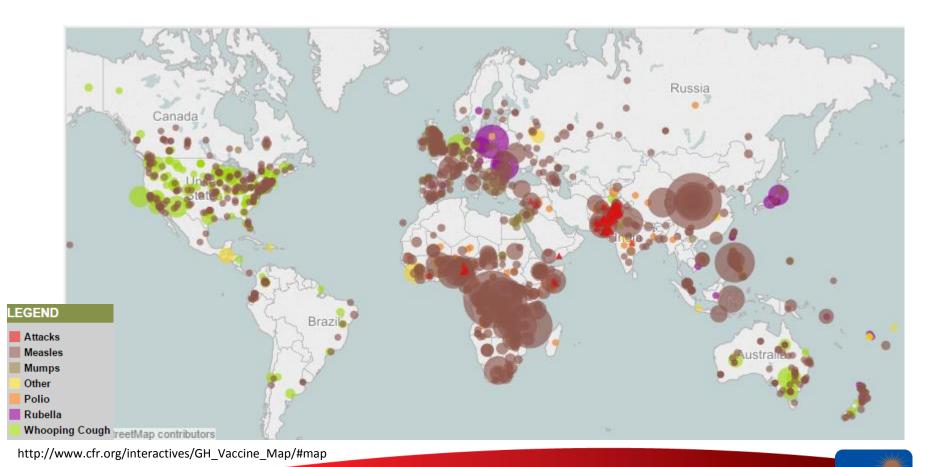
2015 Vaccine Preventable Outbreaks



http://www.cfr.org/interactives/GH_Vaccine_Map/#map



7 year Vaccine Preventable Outbreaks



Department of Health Services

Measles Cases and Outbreaks

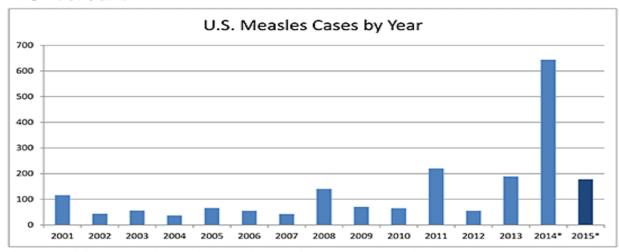
January 1 to March 20, 2015*

178

reported in 17 states and the District of Columbia: Arizona, California, Colorado, Delaware, Georgia, Illinois, Michigan, Minnesota, Nebraska, New Jersey, New York, Nevada, Pennsylvania, South Dakota, Texas, Utah, Washington

4 Outbreaks

representing 89% of reported cases this year



*Provisional data reported to CDC's National Center for Immunization and Respiratory Diseases





http://www.cdc.gov/measles/cases-outbreaks.html

2014 – 644 cases from 27 states



Community Immunity

 When a critical portion of a community is immunized against a contagious disease, most members of the community are protected against that disease because there is little opportunity for an outbreak

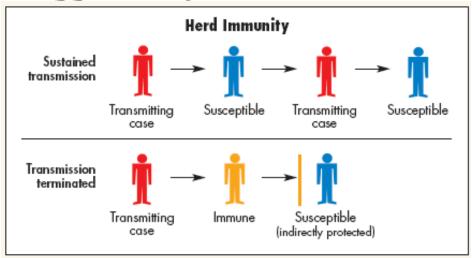


Figure – The principle underlying herd immunity is that the presence of enough immune persons in a community interrupts the transmission of an infectious agent, thereby providing indirect protection for unimmunized (or "susceptible") persons.



So What Can We Do?





Arizona Immunization Exemption Statutes and Rules

- ✓ Arizona Revised Statutes 15-873
- ✓ Arizona Administrative Code

R9-6-706. Exemptions from Immunizations

E. For a child attending a school, a parent or guardian shall submit to the school a written statement of exemption from immunization for personal beliefs as required in A.R.S. § 15-873(A)(1) or written certification of medical exemption as required in A.R.S. § 15-873(A)(2) on a form provided by the Department....



Exemptions



- Medical Exemptions: must be completed by child's physician or nurse practitioner and signed by the parent/guardian
 - Permanent: Medical condition that contraindicates administration of one or more immunizations.
 - **Temporary:** Temporary medical condition that contraindicates the administration of one or more immunizations
 - Lab Evidence of Immunity: if the child has had the vaccine preventable disease. Laboratory proof of immunity must be submitted.
- Child Care, Pre-K, Head-Start, and K-12
- All 50 states allow for these



Exemptions



Religious Beliefs Exemptions:

- People who hold a sincere religious belief opposing vaccination
- Only available Child Care, Preschool and Head Start
- 48 states allow for these

Exemptions

- Personal Belief Exemptions:
 - Immunizations are against the personal beliefs of the parent.
- Only available for grades K-12
- 17 states currently allow for these Arizona is one of them-
 - New Mexico is considered 18 due its flexible wording in its religious exemption statute







Arizona law requires that schools, preschools and childcare facilities obtain this form, completed by a physician or registered nurse practitioner, in order for a child to be exempted from immunization requirements for medical reasons.

Medical Exemption Form

This is the official ADHS-provided form used by https://provided.org/sicians and registered nurse practitioners to document that 1) due to the child's health or medical condition, the child may be adversely affected on a temporary or permanent basis by one or more of the required vaccine doses; 2) a child has laboratory evidence of immunity to one or more specific vaccine-preventable diseases and lab results are attached, or 3) the child has a history of Varicella (chicken pox) disease.

nild's	Name	Date of Birth
To be	e completed by a physician or registered nurse practitioner to exe	empt a child from childcare or school immunization requirements,
Printe	ed Name of Physician or Nurse	
Signa	ature of Physician or Nurse	_Date
Pleas	se list each vaccine included in the exemption and the reas	son for the exemption:
Pleas	se indicate whether this is a <u>permanent</u> exemption	or a <u>temporary</u> exemption
If the	e exemption is <u>temporary</u> , please list the date the exemption	or a <u>temporary</u> exemption n ends
If the	e exemption is temporary, please list the date the exemption Guardian Section: I am aware that in the event the state or county health de	n ends
If the	exemption is temporary, please list the date the exemption /Guardian Section: I am aware that in the event the state or county health de which I cannot provide proof of immunity for my child, he risk period ends, which may be up to 3 weeks or longer.	epartment declares an outbreak of a vaccine-preventable disease for or she may not be allowed to attend childcare and/or school until the ventable diseases, vaccines, and reduced or no cost vaccination
arent/	exemption is temporary, please list the date the exemption /Guardian Section: I am aware that in the event the state or county health de which I cannot provide proof of immunity for my child, he risk period ends, which may be up to 3 weeks or longer. I am aware that additional information about vaccine preservices is available from my local county health departm	epartment declares an outbreak of a vaccine-preventable disease for she may not be allowed to attend childcare and/or school until the ventable diseases, vaccines, and reduced or no cost vaccination nent and Arizona Department of Health Services.
1. 2.	exemption is temporary, please list the date the exemption /Guardian Section: I am aware that in the event the state or county health de which I cannot provide proof of immunity for my child, he risk period ends, which may be up to 3 weeks or longer. I am aware that additional information about vaccine preservices is available from my local county health departm (www.azdhs.gov/phs/immun/index.htm).	epartment declares an outbreak of a vaccine-preventable disease for or she may not be allowed to attend childcare and/or school until the ventable diseases, vaccines, and reduced or no cost vaccination nent and Arizona Department of Health Services. Date D

Medical Exemption Form

- Must be signed by physician or nurse practitioner
- May be permanent or temporary end date if temporary
- Should be used for known/verified history of chicken pox
- Attach any laboratory evidence of immunity to this signed form
- Parent signs bottom section



Use of Medical Exemption for Chicken Pox History

- Students attending school or preschool in Arizona *prior* to 9/1/2011 with parental recall of chicken pox disease are allowed to continue attendance with recall
- Students enrolling in school or preschool in Arizona <u>for the</u> <u>first time after</u> 9/1/2011 are now required to present proof of varicella immunization or a valid exemption for medical reasons, laboratory evidence of immunity or personal beliefs.



Questions about whether vaccines cause autism

Response: Autism has been increasing around the world for many years. Autism rates are the same in vaccinated and unvaccinated children. Many rigorous studies show that there is no link between the MMR vaccine or thimerosal and autism. No one knows yet what causes autism.

The Science Facts about Autism and Vaccines (infographic)

http://www.cdc.gov/vaccines/hcp/patient-ed/conversations/downloads/talk-infants-color-office.pdf



 Questions about whether vaccines are more dangerous than the diseases they prevent



Response: Many of us have not seen the effects of vaccine- preventable diseases (VPDs) because vaccines have been so successful. Today we are lucky to be able to protect our babies from 14 serious diseases that once caused major complications and even death.

http://www.cdc.gov/vaccines/hcp/patient-ed/conversations/downloads/talk-infants-color-office.pdf





 Questions about the number of vaccines and vaccine ingredients

Response: The childhood vaccine schedule is designed to provide protection against serious diseases that may affect infants early in life at the earliest possible time. There is no evidence that a healthy child's immune system will be damaged or overwhelmed by receiving several vaccines at once. Any time you delay a vaccine you leave your baby vulnerable to disease.

http://www.cdc.gov/vaccines/hcp/patient-ed/conversations/downloads/talk-infants-color-office.pdf





Questions about vaccine safety

Response: Millions of children and adults have been vaccinated safely. While any medication, even food, can cause reactions, a child takes a much greater risk of getting a disease if he or she is not vaccinated. The most common vaccine side effects are mild and include swelling, tenderness, and fever.

The Odds a Child Will... (infographic)

http://www.immunizeca.org/wp-content/uploads/2010/12/IMM-917_web.pdf



How do you find the school requirements?

- ADHS Immunization Program Website
 - Make it a favorite
- Check here for updates:
 http://azdhs.gov/phs/immunization/









Arizona Department of Health Services

Health and Wellness for all Arizonans



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Perinatal Hepatitis B Program

Newsletters

Annual Conference

Vaccine Policy Changes

Immunization Survey

Vaccine Preventable Diseases (VPD)

Additional Resources

For Copies of Immunization Records Call:

Arizona Immunization Program Home



- Vaccines for Children (VFC) Program 2014 Enrollment is now available
- Adults Need Immunizations, Too



Clinic locations & recommended schedules.

Get Vaccinated



Info and resources for adults, adolescents and children

Parents & Public



Immunization Requirements & Data Reports.

School & Childcare



Info for providers who participate in this federally funded program.

Vaccines for Children (VFC)



Arizona State Immunization Information System

ASIIS



Immunizations vary by age group, find great resources here.

Healthcare Professionals



Up-to-date reports on immunizations in Arizona.

Statistics & Reports



Archive of Immunications publications and news articles.

Newsletters

Arizona Department of Health Services



Arizona Department of Health Services

Health and Wellness for all Arizonans



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Vaccine Financing & Availability Advisory Committee

Vaccine Preventable Diseases (VPD)

Additional Resources

For Copies of Immunization

Records
Please fill out this form and send via the following:
Fax: 602-364-3285
Email:
ASIISrequest@azdhs.gov

ASIISrequest@azdhs.gov Phone: 602-364-3899 or toll free 1-877-491-5741

Arizona Immunization Program Office 150 N. 18th Avenue, Suite 120 Phoenix, AZ 85007 (602) 364-3630 (602) 364-3285 Fex Arizona Immunization Program School & Childcare Center Requirements and Forms

Immunization Related Forms for Schools and Childcare Centers

Arizona Guide to School and Childcare Immunization Requirements (revised July 2014)

En Español

· Immunization Exemption Forms

Please begin to use these new exemption forms immediately:

- Medical Exemption Form: English | Español Must be completed by the child's physician or nurse practitioner.
- Religious Beliefs Exemption Form: English | Español
 Must be completed by the parent or guardian of a child attending childcare or preschool programs. The initials of the parent/guardian and the date are required next to each vaccine preventable disease description, in addition to the signature and date at the bottom of the form.
- Personal Beliefs Exemption Form: English | Español
 Must be completed by the parent or guardian of a student attending Kindergarten through 12th grade. Personal
 Beliefs exemptions are not applicable in childcare or preschool programs. The initials of the parent/guardian and the date are required next to each vaccine preventable disease description, in addition to the signature and date at the bottom of the form.

Immunization Information and Forms for Childcare Centers, Pre-school and Head Start

- · Childcare Toolkit for Immunization Requirements
- · Requirements and Referral Notice for Childcare, Preschool and Head Start: English | Español
- · Arizona Immunization Requirements for Children Birth to 5: English | Español

School Immunization Requirements and Resources for Kindergarten through 12th Grade

- · School Immunization Toolkit
- · Requirements for Kindergarten through 12th Grade: English | Español
- · Immunization Screening and Referral Form
- Arizona School Immunization Record- ASIR 109 (fillable form)
- . Order Form for ASIR 109
- · Charts to assist in checking schools immunizations of specific age groups
 - · KDG-12th Grade requirements for children under 7
 - . KDG-12th Grade requirements for children 7-10 years of age
 - . KDG-12th Grade requirements for children 11 years and older
- · Statutes and Rules for Immunization Requirements
 - Arizona Revised Statutes 15-871 through 15-874
 - · Arizona Administrative Code, Title 9, Article 7
 - · Arizona Department of Education
 - · Bureau of Child Care Licensing
 - · Homeless Student Resources



Arizona Immunization Requirements



- Arizona Revised Statutes 15-872(B): A pupil shall not be allowed to attend school without submitting documentary proof to the school administrator unless the pupil is exempted from immunization
- Arizona Revised Statutes 15-872(G): Unless proof of an exemption from immunization pursuant to section 15-873 is provided, a pupil who is admitted or allowed to continue to attend and who fails to comply with the immunization schedule within the time intervals specified by the schedule shall be suspended from school attendance until documentary proof of the administration of another dose of each appropriate immunizing agent is provided to the school administrator.

It's the LAW!

• Students must have proof of all required immunizations, or a valid exemption, in order to attend school



- If law was not followed (in good faith) and
- A non-complaint student spreads a VPD,
- Which affects other students, teachers,
- The school can be held liable

2014-2015 School Requirements Children under age 7

Required Vaccines	See below for exceptions requiring fewer or more doses			
<u>4-5 DTaP</u>	4 doses OK if at least one dose given at 4+ years 6 doses required if 5 th dose given under 4 years			
<u>3-4 Polio</u>	3 doses OK if 3 rd dose given at 4+ years 4 total doses OK, even if given in first year of life			
<u>2 MMR</u>	3 doses required if #1 was given before 12 months of age			
<u> 3 Hep B</u>	4 doses required if #3 was given before 24 weeks of age			
1 Varicella	0 doses required if enrolled before 9/1/2011 with history of chicken pox disease			
Valid doses are required. A 4-day grace period is allowed.				

Department of Health Services

2014-2015 School Requirements Children 7-10 years of age

Required Vaccines	See below for exceptions requiring fewer or more doses
4 DTaP/Td	3 doses OK if all were given after 12 months 1 Dose of Tdap may be counted as part of these requirements
4 Polio	3 doses OK if 3 rd dose given at 4+ years
<u>2 MMR</u>	3 doses required if #1 was given before 12 months of age
<u> 3 Hep B</u>	4 doses required if #3 was given before 24 weeks of age
1 Varicella	Varicella not required if enrolled with history of chicken pox disease before 9/1/2011

Valid doses are required. A 4-day grace period is allowed.

2014-2015 School Requirements Children 11+ years of age, Grade 6th - 12th

Required	See below for exceptions requiring fewer or more doses					
3 DTaP/Td*	3 doses OK if all were given after 12 months					
1 Tdap	Required unless last DTaP/Td was within past 5 years					
1 MV/MCV	Required					
4 Polio	3 doses OK if 3 rd dose given at 4+ years					
<u>2 MMR</u>	3 doses required if #1 was given before 12 months of age					
<u> 3 Hep B</u>	4 doses required if #3 was given before 24 weeks of age					
1 Varicella	2 doses if #1 was given at 13+ years of age. Not required if enrolled before 9/1/2011 with chicken pox history					

Valid doses are required. A 4-day grace period is allowed.



Arizona State Immunization Information System (ASIIS)= your friend





Using ASIIS to help with School

- Run Coverage Rate Report- Patient Specific Series forecast
 - Wait- what is that?
 - It creates a patient forecast of when all of your kids from a desired age range and vaccine series will be due or if they are due at all that year.
 - https://asiis.azdhs.gov/



Coverage Rate Report-

Series-Specific Patient Forecast

Report Criteria Report Date: 04/01/2015

As of Date: 03/31/2015

Series: 1 MENINGOCOCCAL, 3 HPV, 1 Tdap

State: AZ

District/Region: All Organization (IRMS): Patient Status: Active Age Range: 13 Years through 18 Years

Patient County: All Zip Code: All Facility: All

Vaccine Status: Valid Vaccinations Only

Patients selected: 2614 Patient ID First Name Middle Name Last Name Birthday Guardian F.N. Phone Number Chart Number Patient Has No Vaccination Forecast Vaccine Family Name Dose Number Recommended Date Minimum Date MENINGOCOCCAL 01/19/2011 01/19/2002 01/19/2011 01/19/2009 Dose Number Minimum Date Vaccine Family Name Recommended Date HPV 09/16/2013 08/13/2013 Vaccine Family Name Dose Number Recommended Date Minimum Date HPV 04/02/2008 04/02/2006 Vaccine Family Name Dose Number Recommended Date Minimum Date MENINGOCOCCAL 05/11/2009 05/11/2009 Vaccine Family Name Dose Number Recommended Date Minimum Date **HPV** 05/12/2015 04/29/2015



Coverage Rate Report-

Under Report → Report Module

• Then select Coverage Rate Report



If you do not have time to run it now- you can also **schedule** it to run and have it emailed to you and/or any other colleague when complete



Change Password

Administration

Answers



Report Continued

Coverage Rate Report								
Run By								
By Ownership								
O By Service								
Specify Age Range								
Series	selec	_	▼ Series Desi	<u>cription</u>				
Age Range		From:						
Age as of Date (Todays date if left blank)								
Limit Report By								
Patient Status	Activ	ve Only	O Inactive Only	All				
Vaccine Status	All Vaccinations Valid Vaccinations Only							
	Hispanic							
Patient Race	Black or African American White							
	Native Hawaiian or Other Pacific I ▼							
Gender	selec		▼ dicir i delici					
District/Region								
Patient County	selec		▼					
ZIP Code	30100		•					
Organization (IRMS)	selec	t			▼			
Do Not Limit	- 50.00	•						
• Facility	selec	▼						
Facility Group	selec	t ▼						
Do Not Limit								
☐ VFC PIN		t ▼						
View By								
O District/Region								
O County/Parish								
○ ZIP Code								
Organization (IRMS)								
Facility								
Facility Group								
○ VFC PIN ● Aggregate (Total Only)								
Display Report Columns								
Complete By Vaccine								
☐ Incomplete Series								
One Dose to Complete Series								
One Visit to Complete Series (Multiple doses needed but could be given with one visit to vaccinator)								
	Back	Reset	Create Patient List	Export Coverage Report	Create Coverage Report			



Report Continued

- Series Select
 - School Grade K-5: 5 DTaP, 4 Polio, 2 MMR, 3 Hep B, 1
 Varicella
 - School Grade 6-12: 5 DTaP, 4 Polio, 2 MMR, 3 Hep B, 1
 Varicella, 1Tdap, 1 MCV
- Enter Desired Age range: e.g. 11 year olds if you selected School Grade 6-12
- Make sure your Organization and Facility is entered
- Select all display report columns
- Then select Create Patient List

Display Report Columns

- Complete By Vaccine
- Incomplete Series
- One Dose to Complete Series
- One Visit to Complete Series (Multiple doses needed but could be given with one visit to vaccinator)



Lastly

- When you receive an AFIX visit
 - Utilize the resources
- But most importantly.....

Provide a Strong Recommendation

- A strong recommendation from the Provider and at the providers office is the key
- Studies show that patients were significantly more likely to get vaccinated or vaccinate a child if they receive a strong recommendation
- You're voice is vital



Resources

Local:

- Arizona Alliance for Community Health Centers
 - http://www.aachc.org/
 - http://www.aachc.org/what-is-a-healthcare-center/map/ to locate a community health center
- County Health Departments
 - StopTheSpreadAZ.org- will link you to your county health department

State:

- Arizona Department of Health Services- Immunization Program Office
 - http://azdhs.gov/phs/immunization/index.htm
- The Arizona Partnership for Immunization (TAPI)
 - Parent page: http://www.whyimmunize.org/parents/
 - Provider page: http://www.whyimmunize.org/for-providers/



Resources



National

- Centers for Disease Control and Prevention
 - Provider Resources for Vaccine Conversations with Parents- <u>http://www.cdc.gov/vaccines/hcp/patient-</u> <u>ed/conversations/index.html</u>
 - For Parents: Vaccines for Your Childrenhttp://www.cdc.gov/vaccines/parents/index.html
 - Vaccine Safetyhttp://www.cdc.gov/vaccinesafety/Concerns/Index.html
- Immunization Action Coalition
 - Talking with Parentshttp://www.immunize.org/concerns/comm_talk.asp
 - Vaccine Information Statements (multiple languages)http://www.immunize.org/vis/
 - Handouts for Patients and Staff- http://www.immunize.org/handouts/



Resources



National

- California Immunization Coalition
 - Vaccine Safety Information-<u>http://www.immunizeca.org/resources/vaccine-safety</u>
- Children's Hospital of Philadelphia
 - Vaccine Education Center- http://www.chop.edu/service/vaccine-education-center/home.html
- Every Child by Two
 - The Questioning Parenthttp://www.ecbt.org/index.php/facts_and_issues/article/the_que_ stioning_parent
- Voices for Vaccines
 - Parents Speaking up for Immunizationhttp://www.voicesforvaccines.org/





Thank you!

Questions?

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602-364-3632

http://www.azdhs.gov/phs/immunization/

